

Amended claims

1. (Currently Amended) An automatically self-correcting billing system for accommodating change to grouping records of charges associated with provision of healthcare to a patient to support payment monitoring, comprising:

an acquisition processor for acquiring data related to charges for at least one encounter of a particular patient with a healthcare provider organization;

a source of rules for use in processing acquired charge data; and
a data processor for,

using said acquired charge related data for creating a record grouping charges for provision of services associated with said at least one encounter and indicating an expected reimbursable amount value for said the grouped charges, said charges being grouped using said rules to provide a reimbursable amount value expected from a payer organization,

determining a change in records of said at least one encounter
indicating a change in clinical service provided to said particular patient by said
healthcare provider organization,

automatically updating the created record grouping charges for
provision of services associated with said at least one encounter and updating the
provided expected reimbursable amount value for the grouped charges in response to
said change in clinical service and

generating an invoice including said grouped charges; and
a payment monitor for monitoring payments received for provision of
services to said particular patient by comparing the updated expected reimbursable
amount in the created record with an amount identified in a received payment
remittance.

2. (Currently Amended) A system according to claim 1, wherein

said data processor groups charges expected to be reimbursed by said payer organization in a single payment remittance received by said healthcare provider organization, said charges being grouped based on at least one of, (a) a single individual charge comprises a group, (b) charges are grouped together in a claim to be submitted to a payer organization and (c) charges are grouped together as an item among a plurality of items in a claim to be submitted to a payer organization and

said data processor automatically generates a corrected invoice in
response to said change in clinical service.

3. (Currently Amended) A system according to claim 1, further comprising a payment monitor for monitoring payments received for provision of services to patients by comparing said expected reimbursable amount in said created record with an amount identified in a received payment remittance wherein
said rules include interim billing and serial billing rules.

4. (Currently Amended) A system according to claim 3, wherein in response to said comparison comparing the updated expected reimbursable amount in the created record with said amount identified in said received payment remittance, said payment monitor generates an indication identifying at least one of, (a) said expected reimbursable amount in said created record matches an amount identified in a received payment remittance and (b) said expected reimbursable amount in said created record fails to match an amount identified in received payment remittances and action is required.

5. (Original) A system according to claim 1, wherein said data processor reallocates a charge in said created record to a different second created record in response to a received message identifying an event.

6. (Currently Amended) A system according to claim 5, wherein said an identified event comprises at least one of, (a) a change in said rules used in processing acquired charge data and (b) an error in grouping said charges for provision of services in said created record.

7. (Original) A system according to claim 1, wherein said data processor creates said record by grouping charges in response to date of charge accrual and payer organization rules.

8. (Original) A system according to claim 7, wherein said payer organization rules comprise at least one of, (a) rules provided by a payer organization and (b) derived rules substituting for payer organization rules.

9. (Currently Amended) A system according to claim 1, wherein said data processor creates said record by grouping charges in response to payer organization rules comprising which at least one of, (a) group together charges accruing within a first predetermined time period for multiple encounters of said particular patient with said healthcare provider organization, (b) group together charges accruing within a second predetermined time period for a single encounter of said particular patient with said healthcare provider organization, said single encounter having a duration comprising a plurality of said second predetermined time periods, (c) group together charges accruing in response to a single encounter of said particular patient with said healthcare provider organization, and (d) group together charges accruing in response to multiple encounters of said particular patient with said healthcare provider organization.

10. (Original) A system according to claim 9, wherein said first predetermined time period and said second predetermined period comprise at least one of, (i) a day, (ii) a week, (iii) a month, (iv) multiple months and (v) a payer organization defined period.

11. (Currently Amended) A system according to claim 1, wherein:
said particular patient comprises a plurality of related patients;
said acquisition processor acquires data related to charges for said at least one encounter of said plurality of related patients, and
said data processor uses said the acquired charge related data for creating a record grouping charges for provision of services to said plurality of related patients.

12. (Currently Amended) An automatically self-correcting billing system for monitoring payment for provision of healthcare to a patient, comprising:

an acquisition processor for acquiring data related to charges for at least one encounter of a particular patient with a healthcare provider organization;
a data processor for,

using said acquired charge related data for creating a record grouping charges for provision of services associated with said at least one encounter and indicating an expected reimbursable amount for said grouped charges, said charges being grouped in response to date of charge accrual and predetermined rules to provide a reimbursable amount value expected from a payer organization,

determining a change in records of said at least one encounter indicating a change in clinical service provided to said particular patient by said healthcare provider organization,

automatically updating the created record grouping charges for provision of services associated with said at least one encounter and updating the provided expected reimbursable amount value for the grouped charges in response to said change in clinical service and

generating an invoice including said grouped charges in response to said change in clinical service; and

a payment monitor for monitoring payments received for provision of services to said particular patients by comparing said the updated expected reimbursable amount in said created record with an amount identified in a received payment remittance, received in response to said generated invoice.

13. (Original) A system according to claim 12, wherein said data processor groups charges expected to be reimbursed by said payer organization in a single payment remittance received by said healthcare provider organization, said charges being grouped based on at least one of, (a) a single individual charge comprises a group, (b) charges are grouped together in a claim to be submitted to a payer organization and (c) charges are grouped together as an item among a plurality of items in a claim to be submitted to a payer organization.

14. (Currently Amended) A system according to claim 12, wherein said data processor creates said record by grouping charges in response to payer organization rules comprising which at least one of, (a) group together charges accruing within a first predetermined time period for multiple encounters of said particular patient with said healthcare provider organization, (b) group together charges accruing within a second predetermined time period for a single encounter of said particular patient with said healthcare provider organization, said single encounter having a duration comprising a plurality of said second predetermined time periods, (c) group together charges accruing in response to a single encounter of said particular patient with said healthcare provider organization, and (d) group together charges accruing in response to multiple encounters of said particular patient with said healthcare provider organization.

15. (Currently Amended) A system according to claim 12, wherein:
said acquisition processor acquires data related to charges for a plurality of encounters of a particular patient with a plurality of healthcare provider organizations, and

 said data processor uses ~~said~~ acquired charge related data for creating a record grouping charges for provision of services associated with said plurality of encounters and indicates an expected reimbursable amount for said grouped charges by an individual healthcare provider organization of said plurality of healthcare provider organizations.

16. (Currently Amended) A system according to claim 12, wherein:
said acquisition processor acquires data related to charges for at least one patient encounter of a particular patient with a healthcare provider organization, and

 said data processor uses ~~said~~ acquired charge related data for creating records grouping charges by responsible entity comprising at least one of, (a) an insurance company and (b) a guarantor.

17. (Currently Amended) A method for automatically self-correcting for change to grouping records of charges associated with provision of healthcare to a patient to support billing and payment monitoring, comprising the activities of:

acquiring data related to charges for at least one encounter of a particular patient with a healthcare provider organization;

applying rules for grouping said charges to provide a reimbursable amount value expected from a payer organization, using said acquired charge related data; and

creating a record grouping charges for provision of services associated with said at least one encounter and indicating said expected reimbursable amount value for said the grouped charges;

determining a change in records of said at least one encounter indicating a change in clinical service provided to said particular patient by said healthcare provider organization;

updating the created record grouping charges for provision of services associated with said at least one encounter and updating the provided expected reimbursable amount value for the grouped charges in response to said change in clinical service; and

monitoring payments received for provision of services to patients by comparing the updated expected reimbursable amount in the created record with an amount identified in a received payment remittance.

18. (Original) A system according to claim 17, comprising a computer readable storage medium incorporating computer processor readable instruction for performing the activities of claim 17.

19. (Currently Amended) An automatically self-correcting billing system for accommodating change to grouping records of charges associated with provision of services to an entity a patient to support reimbursement monitoring, comprising:

an acquisition processor for acquiring data related to charges for services provided to the entity patient;

a source of rules for use in processing the acquired charge data; and

a data processor, coupled to the acquisition processor and rules source, for,

grouping the charges using the rules to provide a reimbursable amount value and creating a record containing data representing the grouped charges and the reimbursable amount value.

determining a change in records indicating a change in clinical service provided to the patient.

updating the created record containing data representing the grouped charges and the reimbursable amount value by updating the provided expected reimbursable amount value for the grouped charges in response to said change in clinical service and

generating an invoice including said grouped charges; and

a payment monitor for monitoring payments received for provision of services to patients by comparing the updated expected reimbursable amount in the created record with an amount identified in a received payment remittance.

20. (Currently Amended) A method for automatically self-correcting for change to charges associated with provision of healthcare to a patient to support billing and monitoring payment for provision of healthcare to a patient, comprising the activities of:

acquiring data related to charges for at least one encounter of a particular patient with a healthcare provider organization;

generating a record grouping charges for provision of services associated with said at least one encounter and indicating an expected reimbursable amount for said grouped charges, said charges being grouped in response to date of charge accrual and predetermined rules to provide a reimbursable amount value expected from a payer organization using said acquired charge related data;

determining a change in records of said at least one encounter
indicating a change in clinical service provided to said particular patient by said
healthcare provider organization;

updating the generated record grouping charges for provision of
services associated with said at least one encounter and updating the provided
expected reimbursable amount value for the grouped charges in response to said
change in clinical service; and

monitoring payments received for provision of services to said
particular patients by comparing said the updated expected reimbursable amount in
said created generated record with an amount identified in a received payment remittance.

21. (Currently Amended) A method for automatically self-correcting for change to grouping records of charges associated with provision of services to a patient an entity to support reimbursement monitoring, comprising the activities of:

acquiring data related to charges for services provided to the entity patient;

applying rules to the acquired charge data for grouping the charges to provide a reimbursable amount value; and

creating a record containing data representing the grouped charges and the expected reimbursable amount value for the grouped charges;

determining a change in records concerning charges for services provided to the patient indicating a change in clinical service provided to the patient;

updating the created record containing data representing the grouped charges by updating the grouped charges and by updating the expected reimbursable amount value for the grouped charges in response to said change in clinical service; and

monitoring payments received for provision of services to the patient by comparing the updated expected reimbursable amount in the created record with an amount identified in a received payment remittance.